

New Jersey Celebrates Adoption Awareness Month with Annual Tribute to People Who Adopt

DHS honored people and families throughout the state who adopt children at the annual Division of Youth and Family Services (DYFS) "Adoption Awareness Month Awards Luncheon" recently held in Trenton. As part of the event,

Commissioner Davy presented a proclamation from Acting Governor Richard J. Codey declaring November as Adoption Awareness Month in New Jersey.

DYFS provides a variety of programs for people who adopt children and special needs children, including a monthly support payment, clothing allowance, free medical insurance for the adopted child and payment of the required legal fees needed to finalize the adoption. Prospective parents are required to complete a home study, which includes training,

interviews and a home visit along with background and reference checks.

"Many people don't think they can adopt but it's just not true. We are working more with people

adopting children of a different race, families from other states, unmarried couples and single individuals. In fact, single parents account for 41 percent of DYFS adoptions," said Commissioner James M. Davy.

Last year, a record 1,410 children were adopted through DYFS, attributable to both the emphasis placed on recruiting more foster and adoptive families in the state's child welfare reform effort, as well as the 1997 federal Adoption and Safe Families Act (ASFA) that provides measures that

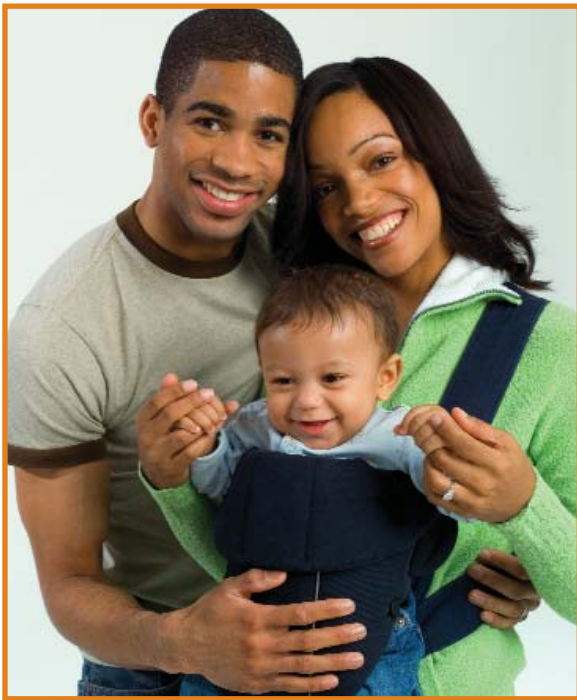
help states across the country see a significant increase in adoptions. ASFA stresses the safety,

permanency and well being of children by reducing their time in foster care and creating more opportunities for adoption.

Nevertheless, as greater numbers of children are adopted, the demand for new families to open their homes to children in need by no means ends. There is also a constant need for families willing to make a home for older children, special needs children and sibling groups.

"A permanent and stable home is so important to these children. As more children become available for adoption, we continue to need more people like those families we are honoring. Our success is a direct result of the hundreds of families who have opened their hearts and homes by adopting. Thanks to the love and support of individuals like those we have honored, more children across the state are now in loving and permanent homes," said Deputy Commissioner for OCS Kathi Way.

To learn more about adopting a child, visit the DYFS adoption Web site <http://www.njadopt.org>. A step-by-step overview of the adoption process is available along with profiles of children waiting to be adopted. A toll-free number, 1-800-99-ADOPT, is also available.



Governor Codey Kicks Off Construction of New Greystone Hospital

Acting Governor Richard J. Codey kicked off construction of the new Greystone Park Psychiatric Hospital on November 15, making way for a smaller, better facility for individuals with mental illness in New Jersey. The new 460,000-square-foot hospital is being built near the old complex in Morris Plains, which opened in 1876.

The new facility will be situated on approximately 200 acres and will include one building with administrative offices, 450 patient rooms, and treatment and program areas, and 60 beds within existing cottages, for a total capacity of 510 patients. Plans for the new hospital originally called for 460 beds. In March, Codey announced the expansion to 510 beds based on recommendations from the Governor's Task Force on Mental Health, which determined that the state hospital system continues to be overcrowded.

"It was one year ago, on my first day in office as Governor, that I came here to spend the day and visit patients at Greystone," said Codey. "During my visit, I made it clear that the problems in New Jersey's mental health system would no longer be swept under the carpet. Today we are fulfilling that promise."

"This is more than just a new facility. We are breaking from the past and our old, failed system and charting a new, more humane course for mental health care in New Jersey," added Codey. "Greystone is both a symbolic and literal representation of a new era in mental health."

Codey was joined at the Morris Plains facility by Commissioner James Davy, Special Assistant Commissioner for Mental Health Services Kevin Martone and Mental Health Task Force Chairman Bob Davison, as well as Greystone officials and mental health advocates.

The expansion builds on other task force recommendations to improve services for individuals with mental illness including, the establishment of a loan forgiveness program for college graduates who enter a career in social services and the establishment of a \$200 million housing trust fund to create 10,000 affordable housing opportunities for those with mental illness.

The new facility will enhance patient care by housing programs and services in one central area in one building so patients will spend less time going from place to place and more time receiving treatment and services. Instead of the large dining halls that previously existed, the new hospital will have small dining areas in each of the 25-bed units, fostering better interaction among patients.

While the size of the hospital and number of patients will decrease, staff size will remain the same, increasing the staff to patient ratio. The hospital will also operate more efficiently and securely with patients in one building instead of the previous four, which were scattered across more than 300 acres.

The project, which is expected to cost an estimated \$190 million, is being financed by bonds through the New Jersey Health Care Facilities Authority and administered by the New Jersey Economic Development Authority. The project is being constructed by Torcon Inc. of Westfield, NJ and is expected to be completed by March 2008.

Demolition of the old dormitory and other existing buildings was completed in late spring and necessary road construction and infrastructure improvements were completed this summer, as planned.

We're on the Web:
www.state.nj.us/humanservices/index.html

**THE NEW JERSEY
DEPARTMENT OF HUMAN SERVICES**

NEWS

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Letter from the Commissioner

When a New Year begins, we often ask, “What are my New Year resolutions?” Diet, exercise, and tightening the “old” budget are some of our most common pledges. After December 31st, however, folks tend to forget their commitments.

But, that’s not the case here at DHS. Over the past year, we went full force with our resolution to reach as many people as we could to make this state a better place for children and families, making significant strides with the state’s child welfare reform plan. We obviously encountered a lot of challenges, some surprises and a lot of potential distractions, yet we were not deterred from reaching our goals. I am very proud of the department’s accomplishments over the past year, including:

- Creating a centralized, 24-hour child abuse hotline;
- Enrolling all children in foster care into HMOs for their primary healthcare;
- Eliminating the backlog of youth in juvenile detention centers who were awaiting mental health placements;
- Doubling the number of children who are receiving mental health services through the Division of Child Behavioral Health Services from 16,000 to 33,000;
- Finalizing adoptions so that the number of children waiting to be adopted at any one time has dropped from 2,500 to just over 2,000;
- Increasing board rates and expanding services to foster parents and relative caregivers;
- Increasing the number of substance abuse treatment slots for families and youth for the first time in many years; and,
- Opening additional child welfare offices throughout the state, thus allowing residents involved in the system greater opportunities to access services locally.

As you can see in this issue, we also kept our commitments to consumers in a myriad of other ways. For instance, read here how several of our divisions are collaborating to help our dual eligibles enroll in the new Medicare Part D drug benefit, how CBVI will be hiring and training more Braille teachers, how DDD will dramatically expand community services for families, and how the Division of Family Development is urging eligible residents to apply for home heating assistance.

I wish I could mention everything that our DHS employees and our partners in the community do to make life better for all of us every day. I don't have the space for that. But I do have just enough space to wish your and your families a happy and successful new year.

Sincerely,

James M. Davy



Medicare Part D and Dual Eligibles Informational Sessions for NJ Residents with Disabilities

DHS Division of Medical Assistance and Health Services (DMAHS) has been working hard to make sure that one of the most vulnerable and medically fragile group of people in New Jersey doesn’t lose any sleep over a major change in the way they get their medications. These are the 140,000 people who are covered by both the federal Medicare and Medicaid health insurance programs, and who could have found their new Medicare drug benefit unaffordable. These individuals are commonly referred to as “dual eligibles,” their new drug benefit under Medicare could have been unaffordable.

A requirement of the legislation that made the new drug benefit possible, known as Medicare Part D, said that Medicaid cannot provide prescription drug coverage to people covered by both programs. The legislation took effect on January 1.

This was bad news to the state’s dual eligibles, who had been relying on Medicaid for their drug coverage and who had no co-pays under that program. Since the Medicare drug benefit does require co-pays, dual eligibles found themselves facing a significant new expense. In addition,

some drugs available through Medicaid are not included on the various Medicare formularies.

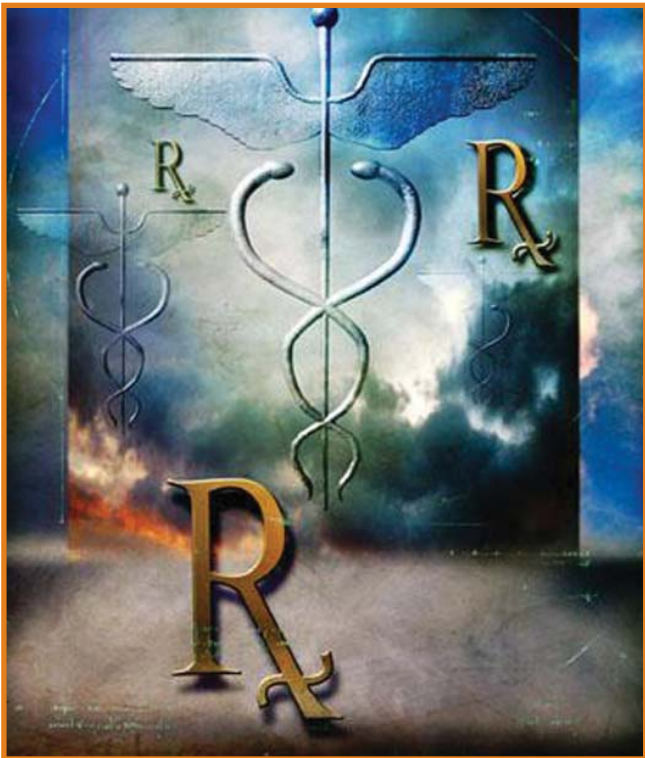
Many of these beneficiaries derive the bulk of their income from Social Security disability payments. They include people who are developmentally disabled or mentally ill and who average four expensive prescriptions a month. Under the Medicare Part D plans, a consumer facing \$12 or so in co-pays might have had to choose between medications and food.

Happily, this won’t be the case in New Jersey since the state legislature last summer appropriated more than \$20 million to help dual eligibles cover the co-pays and drugs not available through Medicare.

But understanding all the changes that accompany the law has still been a daunting task for these

individuals and the family members trying to help them. DMAHS has been striving to assist them by holding informational sessions. In addition, people are encouraged to call the toll-free NJ Medical Assistance hotline at 1-800-356-1561 for help in choosing the best prescription drug plan that suits their needs.

Furthermore, Internet links are available on the DHS Web site for enrollment and informational tools on Medicare’s Web site. For more information on Medicare Part D and Dual Eligibles, visit www.state.nj.us/humanservices/dmahs/pland.htm.



Juveniles Placed in Behavioral Health Treatment Programs, Detention Backlog Reduced

By expanding the number of residential treatment options and treatment homes during the past year, the DHS Office of Children’s Services (OCS) has been able to reduce the backlog of juveniles in detention awaiting placement in behavioral health treatment programs.

Commissioner James M. Davy noting this important development, which has been a key goal of the ongoing child welfare reform plan, stated “Six months ago, 62 children were in detention awaiting placement, including some who had been waiting weeks or months. Today, no children wait more than a few days past their court disposition. We are finally at the point where kids get the right kind of help and get it right away.”

OCS Deputy Commissioner Kathi Way said she expects that the state will continue making timely, appropriate placements. “We will continue to make strong progress in this area working closely with our partners, the Administrative Office of the Courts and the Office of the Child Advocate,” she said.

The OCS has greatly expanded services during the past year, contracting for 279 new community-based treatment beds statewide. “Contracts for additional 232 beds are being negotiated, and a request for proposals will be issued soon to add another 105 beds,” Way continued.

With the addition of these new beds, the OCS will continue to expand the capacity of a complete multilevel system of care, ranging from treatment homes to residential care and in-patient psychiatric hospitals. By January 2006, this system is to be implemented statewide, making New Jersey the first state in the nation to offer a statewide system of care.

DHS Salutes Camden County Boy Who Secures Funding for Braille Instructors

Nine-year-old Camden County resident, Rocco Fiorentino, helped convince the New Jersey legislature to appropriate funding for new Braille instructors around the state. A very happy Rocco Fiorentino was on hand in the library of his elementary school, the Signal Hill School in Voorhees, NJ, when Commissioner James M. Davy announced the appropriation of \$900,000 to hire 12 new Braille instructors.

Davy was joined by school and Voorhees township officials and by New Jersey Assemblyman Louis Greenwald (D-6th, Camden), who also praised Rocco for his advocacy. Rocco’s parents, Tina and Rocco Fiorentino, who have founded The Little Rock Foundation to help other children who are blind, were also present.

“Rocco is a friend to the blind children of New Jersey,” said Assemblyman Greenwald, who noted that Rocco’s lobbying efforts had helped to “level the playing field (for children who are blind) to become literate and well-read.”

“For the second time in his young life, Rocco’s lobbying efforts have paid off for all New Jersey children who are blind or visually impaired,” said Commissioner Davy. “Rocco, you have shown how just one person, no matter how small, can change the world!”

Vito DeSantis, Executive Director of the Commission for the Blind and Visually Impaired (CBVI), said that “with the additional teachers

our students will be provided with four-to-five hours of weekly Braille instruction, up from a level of two-to-three hours per week of instruction.”

Rocco’s most recent foray into the state legislative budgeting process took place last spring when as a second grader he and his

mother attended a state budget forum and appealed to the legislators for more funding. Rocco told the legislators that he and other children who are blind would be illiterate without adequate Braille instruction.

Rocco first testified before the Assembly Budget Committee in 2002. At that time, he was five years old. As a result, funding became available to hire six new Braille instructors across the state.

Rocco is now in the third grade. He is blind as the result of Retinopathy of Prematurity which causes a disease of the retina and affects prematurely born babies. Considered a “miracle child,” Rocco was born four months premature on October 20, 1996 weighing only one and a half pounds. He loves to read Braille, visit the shore, play piano and drums and sing.



Rocco speaking, at the podium between his dad Rocco Fiorentino, Sr. and Assemblyman Louis Greenwald (D-6th, Camden).

Community Collaboratives get Funding - \$1.9 Million

DHS will provide \$1.9 million to fund 16 community collaboratives intended to support families and prevent child abuse and neglect in New Jersey. The funding includes \$25,000 each for a start-up community collaborative in Passaic County and Monmouth County collaboratives located in Keansburg, Long Branch and Red Bank. Community collaboratives in the following 12 communities each received \$150,000 to establish an office location, hire staff and expand their efforts: Asbury Park, Bridgeton, East Orange, Irvington, Newark (four sites), Millville, Orange, Trenton and Vineland.

“Collaboratives” are neighborhood type networks of individuals and agencies that provide a nexus of support for families seeking information and services. The focus is on families who are at risk of becoming involved in the child welfare system or the child behavioral health system, or who are already receiving services through the Division of Youth and Family Services and/or the Division of Child Behavioral Health Services.

Community collaboratives develop networks of prevention in areas where the rates of child abuse and neglect are traditionally high. The collaboratives primarily identify needs and services that cut across the five core areas considered to be precursors to child abuse and neglect: substance abuse, domestic violence, lack of housing, physical health and mental health.

“When we talk about our most vulnerable children, we’re not just talking about DYFS children,” said Davy. “We’re talking about all our children and about how we as a community need to do better by them. This is just one step in ensuring a better future for New Jersey’s children.”

The collaboratives will receive the funding through Division of Prevention and Community Partnerships, which is working with local government, community providers and other stakeholders to help identify local needs so appropriate services may be developed.

DDD Honors Skill Development Sponsor Families: “NFC Month - Caring Every Day”

As part of November’s “National Family Caregiver Month (NFC Month),” the Division of Developmental Disabilities (DDD) honored eight Skill Development Sponsors, representing various New Jersey counties, who provide services for people with developmental disabilities in their own home. The honorees included Barbara Flanders of Belvidere, Warren County; Janet Martin-Barr of Kearny, Hudson County; Willa Chavis of Springfield, Union County; Emma Christian of Plainfield, Union County; Beverly and William Bouford of Jackson, Ocean County; Denise Ewin of Millville, Cumberland County; Brenda and Otis Peterson of Sicklerville, Camden County; and Brenda Cusack of Trenton, Mercer County.

Skill Development Sponsors (Sponsors) receive training from and are licensed by the Department of Human Services. Sponsors provide room, board, meals and other basic care services in

their homes for people with developmental disabilities. Sponsors also keep medication records, help coordinate recreation and other activities, and maintain contact with case managers.

NFC Month, observed every November, is a nationally recognized month that seeks to draw attention to the many challenges facing family caregivers and raise awareness about

community programs that support family caregivers. It is a time when attention is focused on family caregiver concerns. “Caring Every Day” was this year’s theme, corresponding with a campaign that encourages family caregivers to take

three steps – “Believe in Yourself. Protect Your Health. Reach Out for Help.”-- everyday to make their lives easier, improve care and raise awareness about their continued love and commitment.

“We very much wanted to publicly thank the many families who open their homes and hearts to people with developmental disabilities,” said Gregory Fenton, DDD Deputy Director. “We also want to bring attention to our growing need for more caring family members to serve as Sponsors.

Currently, 730 Sponsors are serving approximately 1,450 people. Sponsors are paid between \$1,158 and \$2,007 a month per person, depending on individual needs. However, in 2000, 899 Sponsors served 1,779 people, a bit higher number of people.

Commissioner James M. Davy has expressed his concern that there are fewer families available and wants to recruit new families to open their homes for people with developmental disabilities. “Our skill development homes are one of the pillars of our community services system. Skill sponsors bring a person with disabilities into their home and provide them with care and services in a loving family atmosphere. They are truly doing important work. We’re very concerned and we will make a concerted effort to increase that number,” said Davy. (See Box, Page 5)



Commissioner Davy and honorees enjoy the celebration.

People with Developmental Disabilities Living at Home Receive Needed Services

People with developmental disabilities who live at home will receive expanded services through \$12.5 million in new federal and state funding. The New Jersey Legislature appropriated the funding after hearing from families who care for their developmentally disabled relatives at home, when they appeared at budget hearings last spring. At that time, the families also presented a petition signed by more than 6,000 people.

Assemblyman Louis D. Greenwald, Chairman of the NJ Assembly Budget Committee, joined Commissioner James M. Davy in Trenton to announce the expansion. “This funding will provide support for the families of approximately 2,000 people with developmental disabilities who live at home. Not only is this the right thing to do, it’s the fiscally sound thing to do,” said Greenwald. “More than 70 percent of the families waiting for services told us they want their loved one to stay at home in their own communities - and we heard them” said Davy.

The additional funding will provide for respite services, transitional services for people graduating from high school and services for people participating in the DHS Real Life Choices program. Specifically, it breaks out like this:

- \$3.6 million will allow an additional 1,500 people to receive respites services through the Division of Developmental Disabilities. Respite can range from services intended to provide a family with relief from caregiving to a camp program or recreational services.
- \$4.55 million will provide day activities for 200 individuals who have reached the age of 21 and are transitioning out of special education programs. Following graduation from the educational system, day activities are needed to support the transition to adult life.
- \$4.38 million will allow an additional 300 people to participate in Real Life Choices, the self-directed option in which the individual and family have a budget and can purchase their own services and supports. Self-directed service options like Real Life Choices give developmentally disabled adults creative service options while living at home.

Traditional community-based residential programs cost \$90,000 to \$146,000 per year in New Jersey. Through Real Life Choices, family members are given a budget between \$14,000 - \$63,000 for home renovation, transportation or aides to help with daily living activities, so they can stay at home.

In South Jersey, Child Behavioral Health Services Expand

Children Get Health Services from Provider in their own Community

Kids with behavioral issues in Cumberland, Gloucester and Salem counties now have greater access to health services including intensive case management, mentoring and mobile response and stabilization services with the opening of CGS Family Partnership, Inc.

“Providing appropriate services to our children is of the utmost importance,” said Senator Stephen M. Sweeney (D-3rd) at a recent ribbon cutting ceremony at the CGS headquarters in Sewell. “The new programs will have a major impact on these children and help ensure a bright future for many of them.”

“In the past, children needing behavioral health services were served by our child protection system and often fell between the cracks,” said Commissioner Davy. “Children would often have to go to the other end of the state for services or go without any help at all. By expanding services, we can now keep children at home and in school and more importantly out of trouble.”

In the last year, the number of children being served through Division of Child Behavioral Health Services (DCBHS), which funds the new program, doubled from approximately 16,000 to more than 35,000. So far, as a key component of the state’s child welfare reform efforts, DCBHS has made many advances, including those highlighted below:

- Added 187 youth case managers (YCMs) throughout the state to link children with appropriate behavioral health services and prevent inappropriate institutional placements.
- Increased the number of children served through YCM threefold compared to a year ago - 4,700 children today versus 1,400 children.

- Created an additional 524 treatment beds since April 2004 so children can receive services in their own community.
- Expanded mobile response and stabilization



services (MRSS) to all 21 counties - allowing 90 percent of children receiving MRSS to remain in their present living arrangement and reducing unnecessary and inappropriate placements.

- Expanded care management and family support organizations to all 21 counties compared to only 10 counties pre-reform.

DCBHS, formerly known as “The Partnership for Children,” serves children and adolescents with emotional and behavioral health care challenges and their families across all child-serving systems. In addition, it is charged with reforming service systems to improve outcomes for children, adolescents, and their families. DHS is committed to providing children services in a community-based environment.

Verizon Broadband Access to Improve Delivery of Children and Family Services

Verizon is committing \$2 million in free equipment as well as special rates for high-speed telecommunications services, under its Access New Jersey (ANJ) program, to help the Division of Youth and Family Services (DYFS) improve the delivery of services to children and families around the state. In fact, Verizon will build a video-conferencing network and provide DYFS with technical support and access to Verizon’s ANJ Video Portal for interactive video capability throughout the state.



Across the country, more and more people are using broadband technology. The ANJ portal and facilities will help DYFS provide training to caseworkers in skills such as case management, while also offering community programs to assist children and families. Caseworkers in multiple locations will be able to communicate much easier and participate in one-to-one or multi-location interactive video conferences.

“We’re proud that DYFS is using Verizon’s broadband technologies and fiber-optic network to better serve New Jersey’s children and their families,” said Verizon New Jersey President Dennis M. Bone. “This partnership underscores our commitment to a better quality of life for all New Jerseyans, especially those who are most in need.”

“Thanks to this partnership with Verizon, we can improve training and support for our dedicated staff,” said Commissioner James M. Davy. “By working together, we can protect New Jersey’s children.”

Currently, approximately 25 DYFS field offices have been fully integrated into the system. By spring, 20 additional field offices will be incorporated into the videoconferencing network.

LIHEAP Accepting Applications to Help NJ Residents with High Heating Costs

With home heating costs sky high, New Jersey residents are reminded that there is a way to get help with their heating bills this winter. The Low-Income Home Energy Assistance Program (LIHEAP) is a federally funded, state-administered program that provides an annual grant to income-qualified people. People with incomes of 175 percent of the federal poverty level and under can qualify for the program. **County agencies will accept applications through March 31, 2006.**

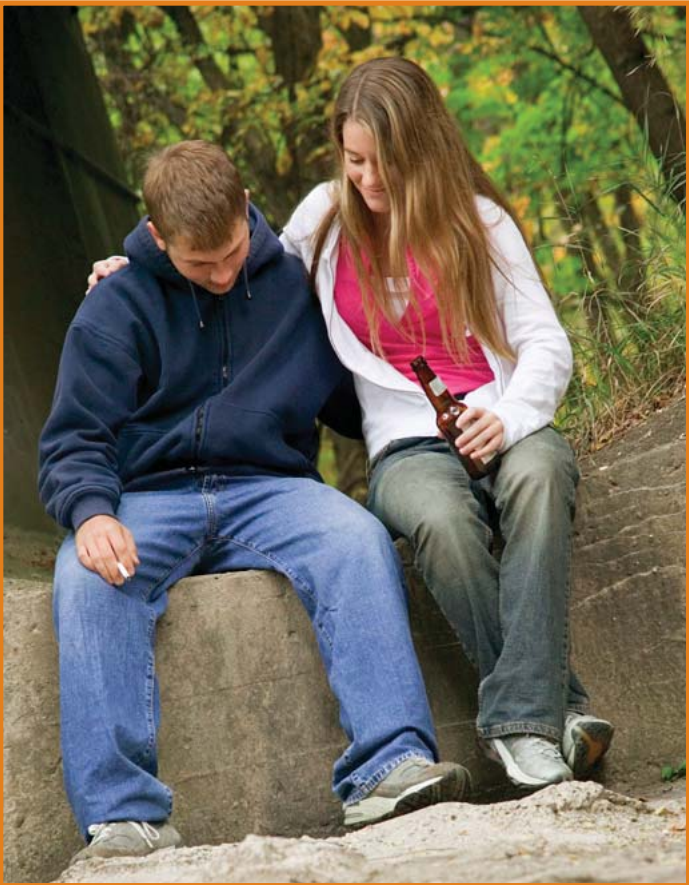
Last year, New Jersey was allocated \$72.4 million in federal funds for the program and was able to serve more than 156,000 families, who received an average of \$530 each. This year's allocation is only 95 percent of that, or \$68.5 million. Energy costs are estimated to rise 48 percent over last year.

For more information on LIHEAP, including where to apply, call 1-800-510-3102 Voice, or visit www.energyassistance.nj.gov. Also, visitors to www.njhelps.org can see if they qualify for this and other assistance programs.

DHS Increases Efforts to Prevent Youth Substance Abuse in Schools

Youth substance abuse prevention programming is expanding in New Jersey’s School Based Youth Services Program (SBYSP) offered in 55 high schools, 13 middle schools and three K-8 schools. A \$1.2 million programming expansion aimed at addressing substance abuse issues among at-risk children and families is part of the state’s efforts to reform the child welfare system.

SBYSP already includes a substance abuse prevention component, in addition to health, mental health and vocational assistance, for at-risk children in the school. The recent expansion consists of \$1 million



in funding to expand the Family Empowerment Program (FEP) to four more additional SBYSP sites -- the FEP program provides intensive counseling and matches families with services in their community. In addition, \$263,000 will be used to expand the “Strengthening Families” Program that teaches parenting skills and teaches parent communication skills and proper discipline. Research has shown that substance abuse has a direct correlation to children being abused.

“This expansion will enable New Jersey to keep more children away from the dangers of drug and alcohol abuse,” said Commissioner James M. Davy. “More importantly, it will help children and their parents become active participants in each other’s lives. The goal is bring them closer together.”

The “Strengthening Families” program, which is offered through the Division of Addiction Services, will be incorporated into the 13 middle school SBYSP programs. Through the program, parents learn to build better relationships with their children. Clear

communication with children is stressed as well as discipline and setting limits. Youth learn how to cope with anger and stress, including resisting peer pressure and developing social skills.

To Help Protect Infant Babies, Grants go to Grassroots Community Groups

Several grants totaling \$97,000 were awarded to 11 community groups throughout the state to help them promote New Jersey’s Safe Haven program, which is intended to deter women from abandoning their babies and allows an individual to keep an unwanted infant safe.

The grants were awarded to the following organizations:

- Association for Special Children (Passaic County) \$5,000;
- Bethel Development Corp (Cumberland) \$10,000; Cathedral Community Development Corp. (Union and Middlesex) \$10,000;
- Jewish Renaissance Foundation (Middlesex) \$10,000;
- Lakewood Community Services Corp. (Ocean) \$10,000;
- My Daughter’s Keeper (Middlesex) \$10,000; Partnership for Community Health (Bergen) \$10,000;
- Paterson Healthy Mothers /Healthy Babies (Passaic) \$8,950;
- St. Luke CDC (Passaic) \$6,600;
- Vision Inspires Synergy in Organization (Union) \$10,000; and,
- Zion Interfaith Corp (Atlantic/Burlington/Camden/Cumberland/ Ocean) \$6,450.

The Safe Haven Infant Protection Act became law in New Jersey on August 7, 2000. The law allows a distressed parent who is unable or unwilling to care for an infant to give up custody of a baby who is less than 30 days old, safely, legally and anonymously. All that is required is that the baby be

brought to a hospital emergency room or police station in New Jersey. As long as the child shows no signs of intentional abuse, no names or other information is required from the person delivering the baby. The law allows mothers to drop off their newborns without fear of prosecution or reprisal.

Since the first Safe Haven baby, the first infant made safe, was brought to Newark’s Beth Israel Hospital, on August 17, 2000, there have been 21 Safe Haven babies. These include 14 who were formally adopted through the Division of Youth and Family Services. Four other babies are in different stages of the adoption process and the mothers of the remaining three babies had a change of heart and took their children back.

Unfortunately, within a two-week span in January 2004, three babies were left abandoned in unsafe location and two of these were found dead. In response, Commissioner Davy expanded upon an existing media awareness campaign by calling for partnerships with local communities to spread the Safe Haven message: “No shame. No blame. No names.” The recent grants are a continuation of the DHS’ outreach efforts.

“We need to take whatever steps are necessary to let people in our communities know about Safe Haven,” said Commissioner Davy. “Only by partnering together with local communities can we prevent tragedies like abandoned babies.”

Parents can call the Safe Haven Hotline, 1-877-839-2339, and get the address and directions for any hospital or police station in the state. The Safe Haven Hotline is in operation 24 hours a day, 7 days a week.

20th Anniversary for Personal Assistance Services Program

The Division of Disability Services (DDS) celebrated the 20th anniversary of the Personal Assistance Services Program (PASP) at an

awards ceremony held in Trenton that more than 200 people attended. The PASP founders John Del Colle of Franklin Lakes, Bergen County and William A.B. Ditto, of Howell, Monmouth County, were honored. In addition, Michael Nuskey of DDS won the Administration Award.



DDS Carolyn Selick cutting the anniversary cake.

As the first consumer-directed personal care program in New Jersey and one of the first such programs in the country, PASP began in Monmouth County as a way to give adults with permanent physical disabilities the opportunity to work, attend school or vocational training and live independently in the community. Personal assistants help with tasks such as light housekeeping, bathing, dressing, meal preparation, shopping, note-taking in class, correspondence, bill paying, mobility, driving and/or use of public transportation.

“When we conceived this program in Monmouth County and launched it as a ten-county demonstration program in 1985,” said William A.B. Ditto, Director of DDS, “we never imagined that in only three years it would prove to be such a valuable and necessary service that the legislature and governor would make it a statewide program.”

“To have the support system that allows you to get ready for work or school, get to work, and be a viable part of your community, is an empowering thing for people with a permanent disability,” said Commissioner James M. Davy. “We also salute the personal assistants who choose this work - assisting others so that their disabilities do not stop them from becoming contributing members of society.”

The PASP has proved to be very important for people with disabilities in New Jersey. Since its inception, the program has helped more than 1,300 individuals with disabilities become more independent.

More Skill Development Sponsors Needed

The Division of Developmental Disabilities (DDD) regional offices can provide New Jersey residents with information on how to become a Skill Development Sponsor. For more details, contact:

DDD Northern Regional Office of Community Services

Catherine Walsh 973-927-2645
(Sussex, Warren, Morris, Bergen, Passaic and Hudson Counties)

DDD Upper Central Regional Office of Community Services

Lea Chillelli 973-324-2000
(Essex, Somerset and Union Counties)

DDD Lower Central Regional Office of Community Services

Jennifer Tomkow 609-292-3722
(Mercer, Middlesex, Ocean, Hunterdon and Monmouth Counties)

DDD Southern Regional Office of Community Services

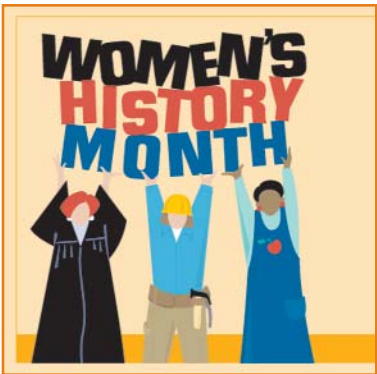
Rosemary Hill 609-561-5070
(Atlantic, Cape May, Cumberland, Gloucester and Salem Counties)

Michelle Ruane 856-770-5900
(Burlington and Camden Counties)

News in Brief

Women’s History Month in March 2006

New Jersey Department of Community Affairs’ Division on Women (NJDCA) and the NJ Advisory Commission on the Status of Women will be presenting awards named in honor of the late Senator Wynona M. Lipman and Connie Woodruff. The awards will recognize outstanding NJ community organizations that have developed policies, services and programs that have benefited women in New Jersey. You are invited to participate in the awards process by nominating organizations to receive this recognition. Recommendations of community organizations will be accepted in the following categories:



- 🔧 New Policy Initiative Award
- 🔧 Community Service Award
- 🔧 Service in Healthcare Award
- 🔧 Service in Education Award
- 🔧 Violence Against Women Program Award
- 🔧 Job Training and Professional Development Program Award
- 🔧 Innovations in Science and Technology Award
- 🔧 Mentoring Program Award

Contact NJDCA for applications and guidelines. Please submit your completed award packet to Theresa Daniels at the Division on Women by Friday, February 10, 2006. The award ceremony will take place in March 2006 during Women’s History Month.

Catastrophic Illness in Children Relief Fund Helps 173 Families

More than \$3.5 million in grants from the Catastrophic Illness in Children Relief Fund went toward helping 173 families pay for uncovered medical bills related to their child’s illness. Since the fund’s creation in 1989, it has awarded more than \$93 million to more than 3,800 New Jersey families, in every county of the state. The Catastrophic Illness in Children Relief Fund Commission administers the fund.

Families of any income may qualify, and the fund does not limit coverage to specific diseases or diagnoses. Eligible medical and related expenses are those not fully covered by insurance, state, or federal programs, and include hospital and physician bills, medications, medical equipment, psychiatric care, home health care, and specialized home and vehicle modifications.

A family may qualify for the fund’s help if a child’s un-reimbursed medical and related expenses exceed 10 percent of the family’s income up to \$100,000 plus 15 percent of any excess income over \$100,000. The child must have been 21 years or younger when the medical expenses were incurred, and families must be state residents. Expenses must have been incurred during a previous 12-month period, and expenses dating back to January 1988 will be considered.

Most families that have been helped by the fund have been working parents with health insurance, but their out-of-pocket expenses were still greater than 10 percent of their income.

The fund is collected from an annual surcharge of \$1 per employee levied on all employers who are subject to the New Jersey Unemployment Compensation Law. The legislation that created the fund protects the anonymity of families applying for help.

New Year's Eve around the World

At midnight Eastern Standard Time on New Year’s Eve, millions of Americans watch the ball drop in New York City’s Times Square. Other countries have their own traditions for observing the last night of the year.



In Scotland, the celebration is called Hogmanay, and 100,000 people or more throng the streets of Edinburgh and Glasgow for

dancing and revelry. In Spain, as the clock bells toll midnight, celebrants eat 12 grapes. At each peal of the bells, they put another grape in their mouths. When the clock stops chiming and the grapes are eaten, the old year is deemed officially over.

In parts of South America, people make an effigy of a person out of old clothes stuffed with newspapers and firecrackers. At midnight, the dummy is set on fire, symbolizing that the old year is going up in smoke.

In Egypt, the New Year is very festive and people still observe the custom that the new crescent moon must be seen before the official announcement is made. The sighting is carried out at the Mohammed Ali mosque, located at the top of a hill in Cairo.

In the Netherlands, people burn Christmas trees on street bonfires and hold firework displays to herald in the New Year, a practice considered to be a means of driving away the spirits of the old year. Fireworks are the main attraction in Australia, where crowds gather around Sydney Harbour Bridge. Fireworks displays are staged near the Eiffel Tower in Paris; and in London, the fireworks focus is the London Eye, the largest Ferris wheel (or observation wheel) in the world, built for the Millennium Celebration in 1999.

Dated Material Please Rush

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